



RCE / TW

**Request for  
Continued Examination  
(RCE)  
Transmittal**

Application Number	<b>10/586824</b>
Filing Date	<b>7/18/2006</b>
First Named Inventor	<b>Gregory Faris</b>
Art Unit	<b>3777</b>
Examiner Name	<b>BRUTUS, JOEL F</b>
Attorney Docket Number	<b>SRI-110/PCT/US</b>

**Request for Continued Examination (RCE) under 37 CFR 1.114 of the above identified application**

**1. Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted. If a final office action is outstanding, any amendments filed after the final office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Reply No. Pages 7
- iii. ☐ Information Disclosure Statement
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☐ Other \_\_\_\_\_

**2. Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

**3. Fees**

- a. ☐ The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. \_\_\_\_\_. I have enclosed a duplicate copy of this sheet.
- i. ☐ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed.
- c. ☒ Payment by credit card. Form is attached.

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO 2038.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

SIGNATURE	<b>/ James E. Parris / Reg.No. 51,135</b>	DATE	<b>2/1/12</b>
PRINTED NAME	<b>James E. Parris</b>	REG. NO.	<b>51,135</b>

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

SIGNATURE	<b>/ Robert Lodenkamper / Reg.No. 55,399</b>
PRINTED NAME	<b>Robert Lodenkamper</b>
DATE	<b>2/1/12</b>

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